

<h2 style="margin: 0;">TRANSMITTAL FORM</h2> <p style="font-size: small; margin-top: 10px;">(to be used for all correspondence after initial filing)</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Application Number</td> <td>10/532,746-Conf. #2683</td> </tr> <tr> <td>Filing Date</td> <td>September 9, 2005</td> </tr> <tr> <td>First Named Inventor</td> <td>Navneet K. Ahluwalia</td> </tr> <tr> <td>Art Unit</td> <td>1648</td> </tr> <tr> <td>Examiner Name</td> <td>E. M. Le</td> </tr> <tr> <td>Attorney Docket Number</td> <td>C1037.70035US01</td> </tr> </table>	Application Number	10/532,746-Conf. #2683	Filing Date	September 9, 2005	First Named Inventor	Navneet K. Ahluwalia	Art Unit	1648	Examiner Name	E. M. Le	Attorney Docket Number	C1037.70035US01
Application Number	10/532,746-Conf. #2683												
Filing Date	September 9, 2005												
First Named Inventor	Navneet K. Ahluwalia												
Art Unit	1648												
Examiner Name	E. M. Le												
Attorney Docket Number	C1037.70035US01												
Total Number of Pages in This Submission													

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Sequence Listing as text file; References C4-C10
<div style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; margin-top: 5px;"></div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	WOLF, GREENFIELD & SACKS, P.C.		
Signature			
Printed name	Maria A. Trevisan		
Date	November 5, 2008	Reg. No.	48,207

x11.05.08

Certificate of Electronic Filing Under 37 CFR 1.8	
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).	
Date: <u>November 5, 2008</u>	Signature: <u>/Nicole Millette Lapomardo/</u> (Nicole Millette Lapomardo)